EXPORT-IMPORT BANK--REPORT OF PREMIUMS PAYABLE FOR EXPORTERS ONLY

	se type or print all information								F <u>NO</u> PRE	EMIUMS 1	PAYABLE, CHI	ECK HERE:
POLICY NUMBER: Report for p						thre	ough) (da	y) (year)				
INSURED:							Date Received		Coverage Type Buyer Type Transaction Type Term Code Premium Rate Super Same Code:			if same for all transactions check box and enter appropriate code or rate here instead of below
I I T E M	NAME OF FOREIG (refer to Step 1. on		COUNTRY	Cover- age Type Code	Buyer Type Code	Transaction Type Code	Term Code	AM	OUNT	Premium Rate Per \$100	PREMIUM DUE	INTERNAL USE ONLY
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
PAGE TOTALS				L								
complete only on last page))))> REPORT TOTALS				3								
acceptance of t that short term	tify that this report is a complete an this report or the premium due is no transactions were made with pri alk until both this report and the	nd accurate declarati ot an acknowledgeme ivate-sector obligors	on of all transactions required nt of coverage and does not co- on six-month open account te	to be reported u	of any pol	icy condition	n or limitatio	on. Unless	otherwise spec	cified by us in	this report, we understan	nd Ex-Im Bank will assume
Name of F	Preparer:			Phone:_(
Signature:(if applicable, use Administrator's signature)			Date Prepared:									

SEE REVERSE SIDE FOR ADDITIONAL NOTES AND

INSTRUCTIONS ON COMPLETING THIS REPORT

COVERAGE TYPES (see Note C. on next page)	CODE
Comprehensive	В
Sales to Your Subsidiaries or Affiliates	B CODE
Private Sector Buyer or Guarantor	
Government Sector (Non-Sovereign) Buyer or Guarantor	. 2
Government Sector (Sovereign) Buyer or Guarantor	. 1

(A "sovereign" is a national government or government entity that the <u>insurer</u> has determined

carries the <u>full faith and credit</u> of the national government. Most government-sector companies and/or agencies do <u>not</u> carry the full faith and credit of their government and are therefore considered "non-sovereign" and should be reported as such unless the <u>insurer</u> has determined otherwise.)

TRANSACTION TYPES	CODE
Letter of Credit (deferred payment or sight)	A
Do not use this code	В
Do not use this code	\mathbf{C}
Bank-Guaranteed (if applicable, use in lieu of any other code)	D
Drafts/Promissory Notes/CAD or SDDP*	E
Open Account	F
Pre-Shipment (selective contracts)	G
Consignment	H
Due Date Rescheduling	I
Floor Plan Extension	I
Medium Term Conversion	J

TERM (corresponding to Transaction Type being reported)	CODE
Sight Letters of Credit	. 1
CAD or SDDP*	. 2
1-60 Days	. 3
61-120 Days	4
121-180 Days	. 5
181-270 Days	. 6
271-360 Days	. 7
1 1/2 Years	. 8
2 Years	. 9
2 1/2 Years	10
3 Years	11
3 1/2 Years	12
4 Years	13
4 1/2 Years	14
5 Years	15
Over 5 Years	16
* CAD = Cash Against Documents	

SDDP = Sight Draft Documents Against Payment

EIB-92-29 (1/99)

MAIL THIS REPORT WITH YOUR PAYMENT TO: EXPORT-IMPORT BANK OF THE UNITED STATES DEPT. 22

WASHINGTON, D.C. 20055

INSTRUCTIONS FOR REPORTING PREMIUMS PAYABLE

Complete the page heading on the front of this report-form, then follow the steps shown below to report each transaction.

(If **NO** premiums are payable, check the appropriate box on the front of this report-form.)

- STEP 1. Enter the FOREIGN BUYER NAME, or if you are reporting a letter of credit transaction, the name of the bank issuing the letter of credit. (please avoid using acronyms if possible.)
- STEP 2. Enter the COUNTRY in which the foreign buyer is located, or if you are reporting a letter of credit transaction, the COUNTRY in which the bank issuing the letter of credit is located. (Abbreviate if necessary.)
- STEP 3. Enter the applicable COVERAGE TYPE CODE from the list given on the front of this report-form. (see Note A and Note C below.)
- Enter the applicable FOREIGN BUYER TYPE CODE from the list given on the front of this report-form. (see NOTE A below.) STEP 4.
- Enter the applicable TRANSACTION TYPE CODE from the list given on the front of this report-form. (see NOTE A and NOTE **STEP** 5. B below.)
- **STEP** 6. Enter the applicable TERM CODE from the list given on the front of this report-form. (Note that the term should correspond only to the particular TRANSACTION TYPE you are recording. For example, if you are reporting a "pre-shipment" or "consignment" transaction indicate the length of the "pre-shipment" or "consignment" period only.) (see NOTE A and NOTE B below.)
- Enter the AMOUNT of the transaction. (Use the contract price for short-term transactions. Use contract price, less downpayment STEP 7. for medium term transaction.)
- **STEP** 8. Enter your PREMIUM RATE. (if your policy has more than one premium rate, or if your premium rate is taken from a rate schedule, be sure to use the correct premium rate.) (see NOTE A below.)
- Enter the PREMIUM DUE by applying the AMOUNT you have declared under Step #7 to the applicable PREMIUM RATE. (if you are using the same premium rate for all transactions reported on this form and have checked the box marked "USING SAME CODE", you need only show total premium due at the end of your report.)
- **STEP** 10. Enter PAGE TOTALS and REPORT TOTALS for AMOUNT and for PREMIUM DUE.
- Read the paragraph at the bottom of the report-form, then enter your SIGNATURE and DATE PREPARED.

ADDITIONAL NOTES

- NOTE A. If you expect to use the same code (or rate) for each transaction recorded on this page, check the box on the front of this report-form marked "USING SAME CODE" then enter the appropriate code (or rate) in the space provided. You need not enter the code (or rate) for each transaction thereafter.
- NOTE B. Be certain that your policy allows you to use the TRANSACTION TYPE or TERM being reported.
- "Comprehensive" means commercial and political risks coverage. Under some policies "comprehensive" also means coverage for "Risk 1" NOTE C. through "Risk 5". "Political Only" means that coverage is restricted to political risks. Under some policies "political only" also means that coverage is restricted to "Risks 1, 2, 3 and 5". Insured transactions with your subsidiaries or affiliates are covered on a "political only" basis.

SPECIAL POLICIES--REPORTING ADDITIONAL INFORMATION (If your policy has been endorsed to require you to report information not included on the front of this report-form, you may use the space provided below to report that information. Numbers to the left refer to line-item numbers on the front of this form.)

ITEM 1	 		 	
2	 	 	 	
3	 	 	 	
4	 	 	 	
5	 	 	 	
6	 	 	 	
7	 	 	 	
8				

EIB-92-29 (1/99)